

CLAIMS ONLY	Application Number 16/729304	Filing Date
	Applicant(s)	

10/729304

1. *Chlorophyll a* (Chl *a*)

~~* May be used for aid if:~~

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
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48						
49						
50						
Total Indep	1					
Total Depend	5					
Total Claims	6					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						